

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF LAW

A901 ANNUAL UPDATE FOR 2016 FOR **SECOND LEVEL BUSINESS CONCERNS**

Instructions: Please review your records and check with your directors, officers, owners, partners, and key employees, to identify changes of information from your previously filed disclosure statement. If there are no changes, you may so indicate in your answers, except that even if there are no changes in the Summary of Principals, the Summary must be completed in full.

If organization is owned in turn by a corporation or other business organization, please provide a chart showing relationships between applicant/licensee and its various direct and indirect owners.

Definitions: The term "applicant" as used in this Second-Level Business Concern Update form, includes licensees and permittees.

The term "Second-Level Company" as used in this Second-Level Business Concern Update form refers to the second level business concern filing this form.

Second Level Company Name: _____

Physical Address: _____

Mailing Address: _____

FEID #: _____

Contact Name: _____

Telephone: _____

Email address: _____

Filing on behalf of Applicant(s) Holding or Applying for
NJDEP Solid or Hazardous Waste License:

Name: _____

Physical Address: _____

Mailing Address (if different):

Contact Name: _____

Title: _____

Telephone: _____

ATTORNEY AND ACCOUNTANT: State the name, address and
telephone number of the second-level company's attorney and
accountant:

Attorney: _____

Telephone: _____

Email address: _____

Accountant: _____

Telephone: _____

Email address: _____

SUMMARY OF PRINCIPALS OF SECOND LEVEL BUSINESS CONCERNS

List current principals of any second level company for which a second-level business concern disclosure statement is required. **Second-level business concern disclosure statements must be filed by all "parent companies" of the applicant.** "Parent companies" include any business concern which holds any equity or debt liability in the applicant or license-holder itself, or which holds, directly or through another entity, any debt liability or equity in a parent company. In other words, all business entities "upstream" of the applicant or license holder, i.e. parents, grandparents, great-grandparents, etc. must file second-level business concern disclosure statements. Please provide an organizational chart.

Before Social Security numbers of persons named below who have not previously consented to disclosure of their social security numbers are provided, such persons should read the attached privacy notice on social security numbers and sign the attached Consent Form for Disclosure of Social Security numbers.

EQUITY HOLDERS/OWNERS

Name	DOB	SS# or FEID	% of Ownership

DIRECTORS

Name	DOB	SS#	Date Appointed

OFFICERS/TRUSTEES

Name	DOB	SS#	Date Appointed
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PARTNERS

Name	DOB	SS# or FEID	% of Ownership
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LLC MEMBERS

Name	DOB	SS# or FEID	% of Ownership
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KEY EMPLOYEES

Name	Title	DOB	SS#
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DEBT HOLDERS

Name	Title	DOB	SS# or FEID
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DEBARRED INDIVIDUALS. List all individuals involved with this company in any capacity whatsoever: whether as employee, independent contractor, consultant, landlord, tenant, debtholder or equity holder: who have ever been debarred from the New Jersey or New York waste industries. You can find a list of the individuals debarred from the New Jersey waste industry at: <http://www.state.nj.us/dep/dshw/a901/a901frms.htm>

Name	Involvement	Date of Birth
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If this form was prepared by a person other than the individual or individuals signing this certification (e.g., an attorney or accountant), indicate that person's name, address and telephone number and relationship to the Second Level Business Concern Update:

Name: _____ Telephone: _____

Address: _____

Title/position: _____

CONSENT FORM FOR DISCLOSURE OF SOCIAL SECURITY NUMBERS

Each **new** individual whose Social Security number is listed in this A901 Annual Update for 2016 must submit a signed copy of this form.

I, _____, hereby certify that I have read the Notice on this page and I consent to the disclosure of my social security number for the limited purposes set forth therein.

Notice required under Section 7(b) of the Federal Privacy Act of 1974

Under section 7(b) of the Privacy Act of 1974, 5 U.S.C. 552a(note), any government agency that asks an individual to disclose his or her Social Security account number must inform that individual by what statutory or other authority such number is solicited, what uses will be made of it, and whether the disclosure is mandatory or voluntary.

The New Jersey Department of Environmental Protection is authorized to request Social Security numbers by N.J.S.A. 13:1E-127(e), the section of the A901 statute that defines the extent of disclosure required under the A901 licensure program. An applicant's Social Security number is used as a secondary identifier when the State Police conduct checks of criminal history records maintained by the State and Federal governments. When the State Police obtain records from outside sources, the Social Security number may be used to determine whether the records pertain to the individual under investigation.

The listing of Social Security numbers on the disclosure forms is voluntary. Under Section 7(a) of the Federal Privacy Act of 1974, the Department cannot deny an A901 application, revoke an A901 license or impose any penalty because of an individual's refusal to disclose his or her Social Security number. However, confirmation of identification and criminal history records without a Social Security number may take longer, which would lengthen the State Police investigation and thereby lengthen a decision on licensure.

Signature

Date

Printed name

CIVIL VIOLATION HISTORY SINCE LAST A901 FILING

The following questions concern civil violations of environmental laws and regulations. In this section, the term "you" refers to the second-level company identified in question 1 and to any predecessor firm.

As used below, the term "environmental laws and regulations" includes laws and regulations relating to the disposal, transfer, transportation, treatment, storage, processing, recycling or disposal of solid waste and hazardous waste; and any other statutes and regulations relating to air and water pollution, discharge of hazardous substances, transportation of hazardous materials and control of pesticides or toxic substances. It includes regulations of the NJDEP, USDOT, or USEPA.

VIOLATION NOTICES: (Include Federal, State, Municipal and Foreign Countries)

(NAME OF ENTITY CITED)	(DATE ISSUED)
------------------------	---------------

(ADDRESS OF VIOLATION)

(ALLEGED VIOLATION)	(TYPE OF NOTICE)
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(DISPOSITION AND EXPLANATION)

(ISSUING AGENCY)	(DOCKET #)	(PENALTY ASSESSED)
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(NAME OF ENTITY CITED)	(DATE ISSUED)
------------------------	---------------

(ADDRESS OF VIOLATION)

(ALLEGED VIOLATION)	(TYPE OF NOTICE)
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(DISPOSITION AND EXPLANATION)

(ISSUING AGENCY)	(DOCKET #)	(PENALTY ASSESSED)
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CRIMINAL CHARGES AND CONVICTIONS SINCE LAST A901 FILING

List all indictments, accusations, summonses, complaints and information against the second-level company or any owner (other than a person holding less than 5% of the equity of the second level company if the second level company is a publicly traded company), partner, director, officer, or key employee of the second level company for any crime or felony not previously disclosed. List all accusations, summonses, complaints, and information filed against the second level company, or any owner (other than a person holding less than 5% of the equity of the second level company if the second level company is a publicly traded company), partner, director, officer, or key employee of the second level company, for any misdemeanor, disorderly persons offense, or criminal violation not previously disclosed.

NOTE: You need not list convictions for minor traffic offenses. Violations of N.J.S.A. 39:5B-25 et seq. or N.J.S.A. 39:5B-30 et seq., Death by Auto, Vehicular Homicide, or comparable motor vehicle offenses in jurisdictions other than New Jersey must be listed.

List convictions first. Use additional copies of this page if necessary:

Name of entity charged/convicted

Description of Crime/offense charged

Indictment/other charging instrument #: _____

Date Charged: _____ Jurisdiction: _____

Disposition: _____

RELEASE AUTHORIZATION

To all courts, probation departments, selective service boards, employers, educational institutions, banks, financial and other such institutions, law enforcement agencies, military records custodians, credit reporting agencies, taxation authorities (including the I.R.S.) and foreign and domestic governmental agencies (federal, state and local), and any other institution or person without exception:

On behalf of _____

(Name of Second Level Business Concern)

I, _____, have

authorized the Attorney General of New Jersey to conduct an investigation into the background of the said enterprise for the purpose of determining the suitability of the above-named enterprise to hold equity in a solid waste or hazardous waste licensee, as provided under N.J.S.A. 13:1E-126 et seq.

Therefore, you are hereby authorized to release any and all information pertaining to the said enterprise, documentary or otherwise, as requested by an appropriate employee, agent or representative of the Attorney General of New Jersey.

This authorization shall supersede and countermand any prior request or authorization to the contrary. A photostatic copy of this authorization will be considered as effective and valid as the original.

Dated: _____

Signature

Type or print title/position

State of New Jersey)

)

County of _____)

I certify that on the _____ day of _____, _____, _____
(Name)

Came before me in person and stated to my satisfaction that he/she:

(A) made the attached instrument; and

(B) executed this instrument as his/her own act.

(Notary public)

(Seal)

SECOND LEVEL BUSINESS CONCERN DISCLOSURE UPDATE CERTIFICATION

This Second Level Business Concern Disclosure Update must be signed and certified below by a responsible official of the Second Level Business Concern. Use additional copies of this page, as necessary.

I, _____

hereby Certify that I have read, in its entirety, the attached Second Level Business Concern Disclosure Update as well as the instructional material provided with this document, and that it is true to the best of my knowledge. I further certify that I have caused a diligent effort to be made by the employees and agents of the Second Level Business Concern to honestly and thoroughly respond to the inquiries in this Second Level Business Concern Disclosure Update and that I have ensured that the information provided on this Second Level Business Concern Disclosure Update form is verified. I further understand that fraudulent, deceptive, misleading or negligent answers may result in the denial or revocation of the Applicant's license. I am aware that if the foregoing statement made by me is willfully false, I am subject to criminal prosecution.

Date: _____ Signature: _____

Type or print name

Type or print title/position

State of New Jersey)
)
County of)

I certify that on the _____ day of _____, _____, _____
(Name)

Came before me in person and stated to my satisfaction that he/she:

- (A) made the attached instrument; and
(B) executed this instrument as his/her own act.

(Notary public)
(Seal)